

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO	DATE
	MA		06-28
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	AK	32	7/10
FORMALITY REVIEW	AK	931	08/16/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	06/14/04
2	✓
3	✓
4	✓
5	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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 08/17/01